Mental Health and Substance Abuse Benefits

For the Commonwealth Indemnity Plan, Commonwealth Indemnity Medicare Extension (OME) Plan, Commonwealth Indemnity Plan PLUS, Commonwealth Indemnity Community Choice Plan and Navigator by Tufts Health Plan

Mental health and substance abuse benefits for the Commonwealth Indemnity Plan, Commonwealth Indemnity Medicare Extension (OME) Plan, Commonwealth Indemnity Plan PLUS, Commonwealth Indemnity Community Choice Plan and Navigator by Tufts Health Plan are provided by United Behavioral Health (UBH). UBH offers a full range of confidential, professional mental health and substance abuse services. UBH clinical staff can help you find a conveniently located network provider and will work with you to make sure you receive the help you need, when you need it. The chart below is an overview of mental health and substance abuse benefits.

	COVERAGE	
BENEFITS	In-Network	Out-of-Network
CONTACT INFORMATION	1.888.610.9039 www.liveandworkwell.com (access code: 10910)	
Annual Deductible (Separate from the medical deductible and out-of-pocket maximum)	None	\$100 per person (Medicare Extension OME) \$150 per person (Indemnity Plan, PLUS, Community Choice, and Tufts Navigator) \$75 per person (RMT, EGR)
Inpatient Care Per Admission Deductible	\$150 per calendar quarter (Indemnity) \$200 per calendar quarter (PLUS, Community Choice and Tufts Navigator) \$50 per calendar quarter (Medicare Extension OME)	\$150 per admission
Mental Health General hospital Psychiatric hospital	100%	80%²
Substance Abuse ¹ General hospital or substance abuse facility		
Intermediate Care ³ (Including, but not limited to, 24-hour intermediate care facilities, e.g., residential, group homes, halfway houses, therapeutic foster care, day/partial hospitals, structured outpatient treatment programs.)	100%	80%
Outpatient Care³ (Including, but not limited to, individuals, family, group therapy, and medication management.) Enrollee Assistance Program (EAP): (Including, but not limited to, depression, marital issues, family problems, alcohol and drug abuse, and grief. Also includes referral services – legal, financial, family mediation, and elder care.)	First 4 visits: 100% Visits 5 and over: \$15 per visit (Indemnity, PLUS, Community Choice and Tufts Navigator) \$10 per visit (Medicare Extension OME)	First 15 visits: 80% per visit Visits 16 and over: 50% per visit ⁴ No coverage for EAP
In-Home Mental Health Care ³	100%	First 15 visits: 80% per visit Visits 16 and over: 50% per visit ⁴
Provider Eligibility	MD Psychiatrist, PhD, EdD, PsyD, MSW, LICSW, MSN, MA, RNMSCS	MD Psychiatrist, PhD, EdD, PsyD, MSW, LICSW, MSN, MA, RNMSCS

- ¹ Substance Abuse Incentive Members reimbursed for inpatient and outpatient co-pays if they complete inpatient and post-discharge care.
- ² Out-of-network inpatient care that is not pre-certified is subject to a financial penalty.
- ³ Treatment that is not pre-certified receives out-of-network-level reimbursement.
- ⁴ All outpatient out-of network visits beyond session 15 require pre-authorization.